

02-21-02

02/19/02
10679035
U.S. PTO

Docket Number 21212C

FILING BY "EXPRESS MAIL" UNDER 37 CFR 1.10

ET327548575US
Express Mail Lab I Number

February 19, 2002
Date of Deposit

A

Address to: Box: Patent Application
U.S. Patent and Trademark Office
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UTILITY PATENT APPLICATION TRANSMITTAL

Transmitted herewith for filing under 37 CFR §1.53(b)(1) is a continuation of prior Application No. 09/577,799, filed May 24, 2000.

1046 U.S. PTO
10/079035
02/19/02

Applicant (or identifier): RYALS ET AL.

Title: GENE ENCODING A PROTEIN INVOLVED IN THE SIGNAL
TRANSDUCTION CASCADE LEADING TO SYSTEMIC ACQUIRED
RESISTANCE IN PLANTS

Enclosed are:

1. ☒ Specification
2. ☒ Drawings - 11 sheets
3. ☒ Oath or Declaration - Copy from prior application (37 CFR 1.63(d))
4. ☒ Application Data Sheet
5. ☒ Nucleotide and/or Amino Acid Sequence Submission
 - a. ☒ Request to use Computer Readable Form (CRF) from parent application
 - b. ☒ Specification Sequence Listing on:
 - i. ☐ CD-ROM or CD-R (2 copies)
 - ii. ☒ paper
 - c. ☒ Statement Verifying Identity of Above Copies
6. ☒ Preliminary Amendment
7. ☐ Assignment Papers (Cover Sheet & Document(s))
8. ☐ English Translation of
9. ☐ Information Disclosure Statement
10. ☐ Certified Copy of Priority Document(s)
11. ☒ Return Receipt Postcard
12. ☒ Fee Transmittal Form (PTO/SB/17)
13. ☒ Two month Extension of Time request in parent application
14. ☒ Credit Card Payment Form

Filing fee calculation:

- ☒ Before calculating the filing fee, please enter the enclosed Preliminary Amendment.

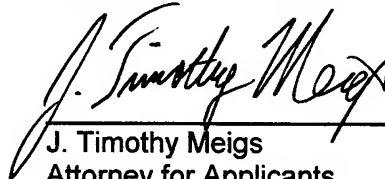
Basic Filing Fee							\$	740
Multiple Dependent Claim Fee (\$ 280)							\$	
Foreign Language Surcharge (\$ 130)							\$	
	For	Number Filed		Number Extra		Rate		
Extra Claims	Total Claims	15	-20		x	\$	18	= \$
	Independent Claims	1	-3		x	\$	80	= \$
TOTAL FILING FEE							\$	740

- ☒ Please charge Applicant's Credit Card in the amount of \$740. A Credit Card Payment Form is enclosed for fee purposes.
- ☒ The Commissioner is hereby authorized to charge any additional fees under 37 CFR § 1.16 and § 1.17 which may be required in connection with this application, or credit any overpayment, to Deposit Account No. 50-1744 in the name of Syngenta Biotechnology, Inc.

Please address all correspondence to the address associated with Customer No. 022847.

Please direct all telephone calls to the undersigned at the number given below, and all telefaxes to (919) 541-8614.

Respectfully submitted,



J. Timothy Meigs
Attorney for Applicants
Reg. No. 38,241
Tel. No. (919) 541-8587

Date: February 19, 2002

10079035-024902

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**FEE TRANSMITTAL
for FY 2002**

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 400.00**Complete if Known**

Application Number	09/577,799
Filing Date	May 24, 2000
First Named Inventor	Ryals
Examiner Name	Kubelik, A
Group Art Unit	1638
Attorney Docket No.	PB/5-21212B

METHOD OF PAYMENT (check all that apply)☐ Check ☒ Credit card ☐ Money Order ☐ Other ☐ None☐ Deposit Account:

Deposit Account Number	
Deposit Account Name	

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Credit any overpayments☐ Charge any additional fee(s) during the pendency of this application☐ Charge fee(s) indicated below, except for the filing fee

to the above identified deposit account.

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
101	740	201	370	Utility filing fee	
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	

SUBTOTAL (1) (\$) **2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

	Extra Claims		Fee from below	Fee Paid
	-20** =	-3** =		
Total Claims			X	
Independent Claims			X	
Multiple Dependent				

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
103	18	203	9	Claims in excess of 20	
102	84	202	42	Independent claims in excess of 3	
104	280	204	140	Multiple dependent claim, if not paid	
109	84	209	42	** Reissue independent claims over original patent	
110	18	210	9	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	400.00
116	400	216	200	Extension for reply within second month	
117	920	217	460	Extension for reply within third month	
118	1,440	218	720	Extension for reply within fourth month	
128	1,960	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$400.00)**SUBMITTED BY**

Name (Print/Type) J. Timothy Meigs

Registration No. 38,241
(Attorney/Agent)**Complete (if applicable)**

Telephone 919-541-8587

Signature

J. Timothy Meigs

Date

2/19/2002

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